

## General

### Title

Planning, organization, and management: percentage of days without the physical presence of an intensivist 24 hours/day.

### Source(s)

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Measure Domain

### Primary Measure Domain

Clinical Quality Measures: Structure

### Secondary Measure Domain

Does not apply to this measure

## Brief Abstract

### Description

This measure is used to assess the percentage of days without the physical presence of an intensivist 24 hours/day.

### Rationale

The aim of intensive care medicine is to provide critical patients with the healthcare that they need, ensuring the quality and safety of care. Intensive care medicine is one of the principal components of modern healthcare systems. There is an increasing demand for this resource, which involves high costs.

The quality of care has gradually come to be the central focus of healthcare, and in recent years patient safety has come to represent one of the key aspects of quality. In the case of intensive care medicine, this interest in quality is even more evident, not only because of its social and economic impact, but also because some of the dimensions involved in the quality of care of critical patients take on greater importance: critical patients are more vulnerable, access to critical care is more limited so efforts to

distribute resources equitably are more important, scant scientific evidence is available, and the efficiency is limited.

The presence of an intensivist in the intensive care unit (ICU) 24 hours/day guarantees the quality of care, decreasing mortality and stay among critical patients.

## Evidence for Rationale

Angus DC, Shorr AF, White A, Dremsizov TT, Schmitz RJ, Kelley MA, Committee on Manpower for Pulmonary and Critical Care Societies (COMPACCS). Critical care delivery in the United States: distribution of services and compliance with Leapfrog recommendations. Crit Care Med. 2006 Apr;34(4):1016-24. [PubMed](#)

Arabi Y. Pro/Con debate: should 24/7 in-house intensivist coverage be implemented?. Crit Care. 2008;12(3):216. [PubMed](#)

Gajic O, Afessa B, Hanson AC, Krpata T, Yilmaz M, Mohamed SF, Rabatin JT, Evenson LK, Aksamit TR, Peters SG, Hubmayr RD, Wylam ME. Effect of 24-hour mandatory versus on-demand critical care specialist presence on quality of care and family and provider satisfaction in the intensive care unit of a teaching hospital. Crit Care Med. 2008 Jan;36(1):36-44. [PubMed](#)

Pronovost PJ, Angus DC, Dorman T, Robinson KA, Dremsizov TT, Young TL. Physician staffing patterns and clinical outcomes in critically ill patients: a systematic review. JAMA. 2002 Nov 6;288(17):2151-62. [PubMed](#)

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Primary Health Components

Planning; organization; management; physically present intensivist

## Denominator Description

365 days (see the related "Denominator Inclusions/Exclusions" field)

## Numerator Description

Number of days with the physical presence of an intensivist 24 hours/day (see the related "Numerator Inclusions/Exclusions" field)

## Evidence Supporting the Measure

### Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

A systematic review of the clinical research literature (e.g., Cochrane Review)

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed

## Additional Information Supporting Need for the Measure

Unspecified

## Extent of Measure Testing

Unspecified

## State of Use of the Measure

### State of Use

Current routine use

### Current Use

not defined yet

## Application of the Measure in its Current Use

### Measurement Setting

Hospital Inpatient

Intensive Care Units

### Professionals Involved in Delivery of Health Services

not defined yet

### Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

### Statement of Acceptable Minimum Sample Size

Does not apply to this measure

### Target Population Age

Does not apply to this measure

### Target Population Gender

Does not apply to this measure

## National Strategy for Quality Improvement in Health Care

### National Quality Strategy Aim

Better Care

### National Quality Strategy Priority

## Institute of Medicine (IOM) National Health Care Quality Report Categories

### IOM Care Need

Not within an IOM Care Need

### IOM Domain

Not within an IOM Domain

## Data Collection for the Measure

### Case Finding Period

Unspecified

### Denominator Sampling Frame

Does not apply to this measure

### Denominator (Index) Event or Characteristic

Does not apply to this measure

### Denominator Time Window

not defined yet

### Denominator Inclusions/Exclusions

Inclusions

365 days

Population: All days of the year during the period reviewed.

Exclusions

Unspecified

## Exclusions/Exceptions

not defined yet

## Numerator Inclusions/Exclusions

Inclusions

Number of days with the physical presence of an intensivist 24 hours/day

Note:

Intensivist: Physician who is a certified specialist in critical care, excluding specialists in training.  
Physical presence is considered necessary.

Exclusions

Unspecified

## Numerator Search Strategy

Fixed time period or point in time

## Data Source

Administrative management data

## Type of Health State

Does not apply to this measure

## Instruments Used and/or Associated with the Measure

Unspecified

## Computation of the Measure

## Measure Specifies Disaggregation

Does not apply to this measure

## Scoring

Rate/Proportion

## Interpretation of Score

Desired value is a higher score

## Allowance for Patient or Population Factors

not defined yet

## Standard of Comparison

not defined yet

## Prescriptive Standard

Standard: 100%

## Evidence for Prescriptive Standard

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Identifying Information

### Original Title

Presence of an intensivist in the ICU 24 h per day.

### Measure Collection Name

Quality Indicators in Critically Ill Patients

### Measure Set Name

Planning, Organization, and Management

### Submitter

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

### Developer

Spanish Society of Intensive and Critical Care and Units Coronary - Clinical Specialty Collaboration

### Funding Source(s)

Boehringer Laboratories

### Composition of the Group that Developed the Measure

Work Group for Planning, Organization, and Management

María Cruz Martín Delgado  
Luis Ángel Domínguez Quintero  
Francisca Prieto Valderrey  
Emilio Moreno Millán  
Francisco Fernández Dorado  
Blanca Obón Azuara  
Isabel Gutiérrez Cia  
Roser Anglés Coll  
Miguel Soto Ibáñez  
Juan Roca Guiseris  
Paz Merino de Cos  
Joaquín Álvarez Rodríguez

#### Scientific Coordination:

Maria Cruz Martín Delgado  
Jesús Blanco Varela  
Lluís Cabré Pericas  
Pedro Galdos Anuncibay  
Federico Gordo Vidal

## Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

## Adaptation

This measure was not adapted from another source.

## Date of Most Current Version in NQMC

2011 Mar

## Measure Maintenance

Unspecified

## Date of Next Anticipated Revision

2016 Jul

## Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in July 2015.

## Measure Availability

Source available in [English](#)  and [Spanish](#)  from the Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC) Web site.

For more information, contact SEMICYUC at Paseo de la Reina Cristina, 36, 4º D, Madrid, Spain; Phone: +34-91-502-12-13; Fax: +34-91-502-12-14; Web site: [www.semicyuc.org](http://www.semicyuc.org) ; E-mail: [secretaria@semicyuc.org](mailto:secretaria@semicyuc.org).

## NQMC Status

This NQMC summary was completed by ECRI Institute on April 2, 2014. The information was verified by the measure developer on April 25, 2014.

The information was reaffirmed by the measure developer on July 2, 2015.

## Copyright Statement

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

The Quality Indicators in Critically Ill Patients update 2011 can be used by any private or public body only for the purposes of research, clinical management, teaching and education, and will not be used for any other purpose. In all cases, full credit to the Spanish Society of Intensive Care Medicine (SEMICYUC) will be granted. The commercial use of the Quality Indicators in Critically Ill Patients update 2011 is explicitly forbidden.

## Production

### Source(s)

Quality indicators in critically ill patients. Madrid (Spain): Spanish Society of Intensive and Critical Care and Units Coronary (SEMICYUC); 2011. 185 p.

## Disclaimer

### NQMC Disclaimer

The National Quality Measures Clearinghouse® (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the [NQMC Inclusion Criteria](#).

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. Moreover, the views and opinions of developers or authors of measures represented on this site do not necessarily state or reflect those of NQMC, AHRQ, or its contractor, ECRI Institute, and inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.